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ABSTRACT

The term "attention deficit disorder" (ADD) is defined, criteria used by the American Psychiatric Association in diagnosing ADD are listed, and possible causes noted. Remediation needs of children with ADD include attention skills, self-esteem, and social skills. Early diagnosis is important, and teachers and parents need to identify effective reinforcement systems to deal with impulsivity and hyperactivity as well as specific skill deficits in perceptual and cognitive areas. Lists of general and specific remediation references conclude this brief analysis. (JW)

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DIGEST #445

ATTENTION DEFICIT DISORDER (ADD)

What is Attention Deficit Disorder?

Many teachers and parents have received and will continue to receive the diagnosis of ADD for children who have problems. The American Psychiatric Association (APA) has identified and defined this disorder. According to the American Psychiatric Association (1980), ADD is indicated when children display inappropriate inattention, impulsivity, and sometimes hyperactivity for their mental and chronological age. ADD may be diagnosed as with or without hyperactivity. Approximately 20% of the population will be diagnosed as having ADD.

Teachers and parents are the ones who usually seek help for children who exhibit the problems associated with ADD. Children from ages 8 to 10 years old are most likely to be referred and diagnosed as ADD. The younger the child is when diagnosed as ADD, the more severe form of ADD they are likely to show. Conversely, if preadolescent and/or adolescent children are diagnosed, they will usually show a less severe form of ADD. ADD is most obvious in situations that call for self-application or in group situations and may be absent in a one-to-one situation or in a situation that is novel to the child. These facts should be kept in mind as the criteria used for diagnosis of ADD are considered.

What are the APA Characteristics of ADD?

The American Psychiatric Association (1980) uses the following criteria for diagnosing ADD.

1. Inattention (will exhibit at least three of the following):
   - often fails to finish things he or she starts
   - often seems not to listen
   - is easily distracted
   - has difficulty concentrating on schoolwork or other tasks requiring sustained attention
   - has difficulty sticking to a play activity
2. Impulsivity (will exhibit at least three of the following):
   - often acts before thinking
   - shifts excessively from one activity to another
   - has difficulty organizing work (this not being due to cognitive impairment)
   - needs a lot of supervision
   - frequently calls out in class
   - has difficulty awaiting turn in games or group situations
3. Hyperactivity—ADD may be diagnosed as with or without hyperactivity (if hyperactive, will show at least two of the following):
   - runs about or climbs on things excessively
   - has difficulty sitting still or fidgets excessively
   - has difficulty staying seated
   - moves about excessively during sleep
   - is always "on the go" or acts as if "driven by a motor"
4. Onset before age 7.
5. Duration of at least 6 months.
6. Not due to schizophrenia, affective disorder, or a severe or profound mental retardation.

When a child shows the appropriate criteria, the diagnosis of ADD will be given.

Associated Problems of Children with ADD According to the APA Criteria

Teachers and parents who deal with children with ADD will need to deal with and work on improving their attention skills, impulsivity, and hyperactivity, if present. Further research indicates that self-esteem and social skills will also need to be remediated. Perceptual and conceptual skills are also affected and need to be worked on. Finally, since ADD seems to affect children's reinforcement responses and intrinsic motivation as well, effective reinforcement systems need to be found. Many of these remediation needs in ADD children are interconnected and approaches will impact one another.

What are Possible Causes of ADD?

Researchers still stress that no conclusive evidence on ADD is available but indications are leaning toward some probability of ADD being genetic, prenatal, or physical in nature. Because of the nature of possible causes, medication is often tried as an answer to the problems seen in ADD children. However, no one medication has been found to be successful with all ADD children. Dexedrine, Ritalin, and Cylert are commonly prescribed. Active research into the causes is ongoing.

What are Some Directions for Teaching Students with ADD?

ADD is often diagnosed as secondary to other learning difficulties which may range from learning disabilities to emotional disturbance. The earlier the diagnosis can be made and remediation begun the better the chances of avoiding these other complicating difficulties.

As indicated by the name of this disorder, attention skills will need extensive work. Attention is an important prerequisite for all learning and success in school. Students will need to learn to finish work once started. They will need to learn to listen and be helped to have as few distractions as possible. Additionally, they should be programmed to build up their length of attention span. Some sources of ideas for this attention building are listed at the end of this Digest.

Impulsivity is also an area needing remediation. Students will need to stop and think before they answer or begin work. This will require much supervised remediation at first but this control must eventually become self-controlled on the student's part. Activities and plans for working with impulsivity are available.

Hyperactivity or an inability to control movement, if present, can interfere with attending and learning. Teaching students how to slow down and become aware can include activities such as "The Turtle Imagery Procedure"—this teaches chil-

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dren to say they will go slow, like a slow turtle, in a structured program that includes more inclusive exercises. Other helpful methods include modeling of appropriate behavior by adults, self confrontation with videotape, role playing, biofeedback, and relaxation.

One major difficulty students with ADD will encounter is problems in the area of effective socialization with peers. It is a cycle that results when students fail to make friends and get along with others, they then also have negative feelings about themselves.

Other specific skill deficits in perceptual and conceptual areas will also need attention. Much of the work in this area focuses on the task to be taught and uses a strong behavioral approach emphasizing incremental learning steps.

ADD seems to affect reinforcement response. But for any remediation program to succeed, parents and teachers will need to find out what would be potentially reinforcing for a student, and then a reinforcement schedule can begin to be planned. Success for those students is crucial.

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Resources

Contact your local school psychologist, examiner, or personnel in charge of assessment and diagnosis in your school district for further information on ADD.

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